	CLAIMS	AS FILED -		(Calum	n2)	SMAI			OR	OTHER SMALL E	
TOTAL CLAIMS		20				P/A	TE	FEE		RATE	FEE
POR		NUMBER	FILED	MUMBER EXTRA		BASI	C FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS		is 2 Cmin	2 C minus 20-		• -		9=		OR	X\$18=	
NDEPENDENT CLAIMS		2 mi	nus 3 e	-		X4	120		OR	X84=	
	DEPENDENT CLA	M PRESENT	RESENT				40o		OR	+280=	
1 4 6 4 di	fference in column	en enter	TO in co	Asmn 2		TAL		OR	TOTAL	150	
d/24/		S AMENDED		TII	(Column 3)			ENTITY	OЯ	OTHER SMALL	THAN
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indep	endent3.	Migue	-3	442	./	×	42=		ОЯ	X84=	
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Total	CLAM REMAIN AFTE AMENDS	AS ING IR MENT Minus	PREV PAI	TOUSLY D FOR		7 H	G 9- (42-		OF OF	Y04-	2
AMENDA SA SA SA SA SA SA SA SA SA SA SA SA SA	CDAM REMAIN AFTE AMENDS	Minus  OF MULTIPLE D	PRIEV PAII	FOR FOR WIT CLAIM		非			1	X84=	2

Application or Docket Number